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 16562 US PTO 031904	UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new non-provisional applications under 37 C.F.R. § 1.53(B))</i>	Attorney Docket No. M61.12-0603 First Inventor or Application Identifier Kevin R. Powell et al. Title FULL-FORM LEXICON WITH TAGGED DATA AND METHODS OF CONSTRUCTING AND USING THE SAME Express Mail Label No. EV178024957US
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U.S.P.T.O.
10/804998
031904

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		Address To: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> *Fee Transmittal Form e.g., PTO/SB17) <i>(Submit an original and a duplicate for fee processing)</i>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer program (<i>Appendix</i>)
2. <input type="checkbox"/> Applicant Claims small entity status		8. Nucleotide and/or Amino Acid Sequence Submission <i>(If applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification <i>[Total Sheets</i> 37] <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Copy b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 Copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statement verifying identity of above copies
ACCOMPANYING APPLICATION PARTS		
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))		
10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)		
11. <input type="checkbox"/> English Translation Document (if applicable)		
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO – 1449 <input type="checkbox"/> Copies of IDS Citations		
13. <input type="checkbox"/> Preliminary Amendment		
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>		
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>		
16. <input type="checkbox"/> Nonpublication Request Under 35 USC 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent		
17. <input type="checkbox"/> Other:		

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation –in part (CIP) of prior application No: _____ / _____

Prior application information: Examiner _____

Group/Art Unit: _____

FOR CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

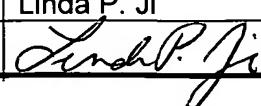
17. CORRESPONDENCE

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Name (Print/type)	Linda P. Ji	Registration No. (Attorney/Agent)	49,027	
Signature			Date	3/19/04

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16562 U.S.PTO

FEE TRANSMITTAL

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1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fee required under 37 C.F.R. § 1.16 and 1.17, including any petition fee, and credit any over payments to Deposit Account No. 23-1123. Westman, Champlin & Kelly, P.A.			3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee</th> <th colspan="3">Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Code</th> <th>(\$)</th> <th>Code</th> <th>(\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - Late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - Late provisional Filing Fee or cover sheet</td> <td></td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For Filing a Request for Reexamination. 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(ex parte)		1251	110	2251	55	Extension for reply within first month		1252	420	2252	210	Extension for reply within second month		1253	950	2253	475	Extension for reply within third month		1254	1,480	2254	740	Extension for reply within fourth month		1255	2,010	2255	1,005	Extension for reply within fifth month		1402	330	2402	165	Filing a brief in support of an appeal		1403	290	2403	145	Request for oral hearing		1814	110	2814	55	Terminal Disclaimer Fee		1452	110	2452	55	Petition to Revive - unavoidable		Total	40	20	20	18	360	Indep.	5	3	2	86	172	Multiple Dependent Claims						** Insert 3 and 20, or number previously paid if greater; Reissue see below						Large Entity Fee			Small Entity Fee			<table border="1"> <thead> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> <th colspan="2">Description</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td colspan="2">Claims in excess of 20</td> </tr> <tr> <td>1201</td> <td>86</td> <td>2201</td> <td>43</td> <td colspan="2">Independent claims in excess of 3</td> </tr> <tr> <td>1203</td> <td>290</td> <td>2203</td> <td>145</td> <td colspan="2">Multiple Dependent Claims</td> </tr> <tr> <td>1204</td> <td>86</td> <td>2204</td> <td>43</td> <td colspan="2">Reissue Independent Claims over Original Patent</td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td colspan="2">Reissue claims in excess of 20 and over original patent</td> </tr> </tbody> </table>			Code	Fee (\$)	Code	Fee (\$)	Description		1202	18	2202	9	Claims in excess of 20		1201	86	2201	43	Independent claims in excess of 3		1203	290	2203	145	Multiple Dependent Claims		1204	86	2204	43	Reissue Independent Claims over Original Patent		1205	18	2205	9	Reissue claims in excess of 20 and over original patent					Subtotal (2) \$ 532						Subtotal (3) \$	Other Fee (specify) _____						
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Signature Linda P. Ji
(Linda P. Ji)

Reg. No. 49,027

Date 3/19/04

Deposit Account No. 23-1123